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PATENT APPLICATION FEE DETERMINATION RECORD	Application or Docket Number 10/772,335

CLAIMS AS FILED - PART I

FOR	NUMBER FILED (Column 1)	NUMBER EXTRA (Column 2)	SMALL ENTITY RATE	FEE	OR	OTHER THAN SMALL ENTITY RATE	FEE
BASIC FEE (37 CFR 1.16(a))				$	OR		$ 770
TOTAL CLAIMS (37 CFR 1.16(c))	38 minus 20 =	* 18	x $ =		OR	x $ 18 =	324
INDEPENDENT CLAIMS (37 CFR 1.16(b))	3 minus 3 =	* 0	x =		OR	x =	0
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))			+ =		OR	+ =	
* If the difference in column 1 is less than zero, enter "0" in column 2			TOTAL		OR	TOTAL	1094

CLAIMS AS AMENDED - PART II

AMENDMENT A

	CLAIMS REMAINING AFTER AMENDMENT (Column 1)		HIGHEST NUMBER PREVIOUSLY PAID FOR (Column 2)	PRESENT EXTRA (Column 3)	SMALL ENTITY RATE	ADDI-TIONAL FEE	OR	OTHER THAN SMALL ENTITY RATE	ADDI-TIONAL FEE
Total (37 CFR 1.16(c))	* 38	Minus	** 38	= 0	x $ =		OR	x $ =	0
Independent (37 CFR 1.16(b))	* 2	Minus	*** 3	= 0	x =		OR	x =	0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ =		OR	+ =	
					TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	0

AMENDMENT B

	CLAIMS REMAINING AFTER AMENDMENT (Column 1)		HIGHEST NUMBER PREVIOUSLY PAID FOR (Column 2)	PRESENT EXTRA (Column 3)	RATE	ADDI-TIONAL FEE	OR	RATE	ADDI-TIONAL FEE
Total (37 CFR 1.16(c))	* 41	Minus	** 38	= 3	x $ =		OR	x $ 50 =	150
Independent (37 CFR 1.16(b))	* 6	Minus	*** 3	= 3	x =		OR	x 200 =	600
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ =		OR	+ =	
					TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	750

AMENDMENT C

	CLAIMS REMAINING AFTER AMENDMENT (Column 1)		HIGHEST NUMBER PREVIOUSLY PAID FOR (Column 2)	PRESENT EXTRA (Column 3)	RATE	ADDI-TIONAL FEE	OR	RATE	ADDI-TIONAL FEE
Total (37 CFR 1.16(c))	* 64	Minus	** 41	= 23	x $ =		OR	x $ 50 =	1150
Independent (37 CFR 1.16(b))	* 5	Minus	*** 6	= 0	x =		OR	x =	0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ =		OR	+ =	
					TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	1150

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.